PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

10/501334

			(Column 1)		(Column 2)		1	TYPE		OR	OR SMALL ENTITY	
TOTAL CLAIMS			11					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	\$375	OR	BASIC FEE	\$750
TOTAL CHARGEABLE CLAIMS			// minus 20= *		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			<u> </u>		<u> </u> *	1		X42=		OR	X84=	
MU	JLTIPLE DEPEI	NDENT CLAIM P	RESENT		<u></u> :			+140=		OR	+280=	
* If	the difference	e in column 1 is	less than	zero, enter	"0" in c	"0" in column 2		TOTAL		OR	TOTAL	
	C	LAIMS AS A	MEND	ED - PAR'	T II	11			<u> </u>	10	OTHER	ΤΗΔΝ
_		(Column 1)		(Colur		(Column 3)	•	SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR.	X84=	
L	FIRST PRESE	ENTATION OF MI	ULTIPLE C	EPENDENT	CLAIM	И []]	+140=		ÖR	+280=	
								TOTAL ADDIT: FEE			TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)											ADDIT. PEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		HATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total		Minus					X\$ 9=		OR	"X\$:18=	
AME	Independent	*	Minus			E	海	X42=		OR	X84≡	
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			rri de de de ouvre de se de				Å	ADDIT FEE		OR ,	TOTAL ADDIT: FEE	
(Column 1) (Column 2) (Column 3)									Tilliani.	tive helio		
AMENDMENTC		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	JER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RÁTE	ADDI- TIONAL FEE
NON	Total		Minus	**************************************				X\$ 9 _≒		OB	.X\$18≑	
ME	Independent		Minus	***	20.2.24 10.4.2			X42= ^Y	就"我们"一个心道里	OR.		in a second for the
	FIRST PRESE			34.	OR		<u> </u>					
* If the fatirule solution to be so the surface of the solution of the solutio								+140≜⊜			,+280≐,	
·** 1	If the entry in column 1 is less than the entry in column 2; write "0" in column 3. If the "Highest Number Previously Paid For IN THIS SPACE is less than 20; enter 20; ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter: "3.									ÖÄ.	PTOTAL DDIT FEE	
٦	he "Highest Num	ber Previously Paid	For" (Total	or Independe	nt) is the	highest number	four	nd in the appi	opriate box	in cólu	ımn 1.	